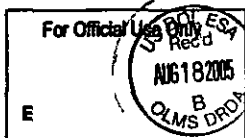


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U 9814	2 Fiscal Year Covered From. 1 / 1 / 2004 Through 12 / 31 / 2004
3 Name and address of person filing Name Stephen E. UTLEY P O Box, Bldg Room No. if any Street 6201 CHESHIRE DR City MT. VERNON State IN ZIP Code + 4 47620	4 Name, file number and address of labor organization. Name BLET DIV 742 Labor Organization File Number 005603 P O Box, Building and Room Number if any Street P.O BOX 175 City HANSON State Ky 42413 ZIP Code + 4
5 Position in labor organization	

Enter appropriate data below if, during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any) Name Trade Name, if any P O Box Bldg Room No. if any Street City State ZIP Code + 4	7 a. Nature of Interest, Transaction or Income. 7 b. Amount.

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief true, correct, and complete. (See the section on penalties in the instructions.)		
Signed <u>Stephen E. Utley</u>	On <u>8/7/05</u> Date	<u>812-985-9232</u> Telephone Number

Name of Person Filing Stephen E Utley	File Number U-
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B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name _____</p> <p>Trade Name If any _____</p> <p>P O Box, Bldg Room No If any _____</p> <p>Street _____</p> <p>City _____</p> <p>State _____ ZIP Code + 4 _____</p>	<p>9 Business deals with</p> <p><input type="checkbox"/> a Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10 If 9.b or 9 c. is checked give trust or employer's name</p> <p>Name _____</p> <p>Trade Name, if any _____</p> <p>P O Box, Bldg. Room No. if any _____</p> <p>Street _____</p> <p>City _____</p> <p>State _____ ZIP Code + 4 _____</p>	<p>11 a. Nature of such dealing</p> <p>11 b. Approximate dollar value of such dealing</p> <p>12.a Nature of interest held or income received</p> <p>12 b Amount.</p>

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<p>13 a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name KUTAWSKI & NOWAK, P C</p> <p>Trade Name If any _____</p> <p>P O Box, Bldg Room No If any _____</p> <p>Street 1331 PARK PLAZA DRIVE</p> <p>City Suite 2</p> <p>State FAHLOW, IL</p> <p>State 62289 Code + 4 1764</p>	<p>14 a. Nature of payment.</p> <p>Tickets to Three base ball games 4 per game</p> <p>1 catered christmas Party</p> <p>1 lunch after union meeting</p>
<p>13 b Is the Business an Employer <input type="checkbox"/> or Consultant <input checked="" type="checkbox"/> ?</p>	<p>14 b. Amount of payment.</p> <p>Unknown</p>